STUART RABNER ATTORNEY GENERAL OF NEW JERSEY Division of Law P.O. Box 45029 124 Halsey Street Newark, New Jersey 07101

FILED

April 23, 2007

NEW JERSEY STATE BOARD OF MEDICAL EXAMINERS

STATE OF NEW JERSEY DEPARTMENT OF LAW & PUBLIC SAFETY DIVISION OF CONSUMER AFFAIRS STATE BOARD OF MEDICAL EXAMINERS

IN THE MATTER OF THE SUSPENSION OR REVOCATION OF THE LICENSE OF

VICTOR M. BASBUS, M.D.

Administrative Action

LICENSE NO.: 25MA03378900

FINAL ORDER OF DISCIPLINE

TO PRACTICE MEDICINE AND SURGERY IN THE STATE OF NEW JERSEY

This matter was opened to the New Jersey State Board of Medical Examiners upon receipt of information which the Board has reviewed and on which the following findings of fact and conclusions of law are made.

#### FINDINGS OF FACT

- 1. Respondent, Victor M. Basbus, M.D. is the holder of License No. 25MA03378900, and was licensed to practice medicine in the State of New Jersey in 1997. His license was in an active status until the expiration date of June 30, 2005, after which time Respondent permitted that license to lapse.
- 2. Respondent's address of record with the Board is 33  $5^{\rm th}$ Avenue #1B, New York, New York 10003.

## CERTIFIED TRUE COPY

- 3. By letter dated October 17, 2005, the Board of Medical Examiners scheduled Respondent's appearance at an investigative inquiry on December 7, 2005. The purpose of that inquiry was to question Dr. Basbus about his care, treatment and billing of patients J.C., I.C., J.C., R.H., S.M. and R.M., all of whom were allegedly seen by Dr. Basbus at Kaiser HealthCare, located in Oakhurst, New Jersey. The letter was sent to Dr. Basbus' address of record.
- 4. On November 10, 2005, Respondent's counsel, wrote a letter to the Board, which stated that his client would not appear at the investigative inquiry, upon advice of counsel, due to the fact that Dr. Basbus was currently under indictment in the State of New York. Respondent's counsel, therefore, asked for a six (6) month adjournment of the investigative inquiry until the New York criminal matter resolved.
- 5. Further inquiry revealed that on or about March 22, 2005, Dr. Basbus had been indicted in the State of New York, in New York County, along with nine other individuals and six companies, for allegedly committing the crime of enterprise corruption, in violation of P.L. §460.20(1). The indictment was unrelated to the matter about which the Board sought to question Respondent.
- 6. By letter dated November 23, 2005, the Board informed Respondent's counsel that Dr. Basbus was still required to cooperate fully with the Board's investigation and appear at the

scheduled inquiry. Respondent's counsel was also advised that he could place his objection on the record at any time during questioning to protect his client's Fifth Amendment rights.

- 7. Respondent's counsel on December 5, 2005, responded to the Board's letter and requested all documents related to the inquiry. In response, counsel was provided all patient records involved in the matter.
- 8. On December 6, 2005, Respondent's counsel informed the Board that because invoices from patients in question and attendance records from Kaiser HealthCare were not provided to Dr. Basbus, Dr. Basbus would not appear at the December 7, 2005 investigative inquiry.
- 9. Respondent failed to appear at the December 7, 2005 inquiry. The matter before the Board was adjourned and a subpoena, dated December 8, 2005, was issued to Dr. Basbus for him to appear at a second investigative inquiry on January 18, 2006. The subpoena was served in New York upon a co-worker of Dr. Basbus in his New York office on or about December 12, 2005. A copy was mailed to Dr. Basbus' address of record on December 12, 2005
- 10. Prior to the January 18, 2006 investigative inquiry, counsel for Dr. Basbus informed former DAG Goodman that Dr. Basbus had been arrested by criminal authorities and would not be appearing at the January 18, 2006 investigative inquiry.

Investigation revealed that on or about January 10, 2006, Respondent was indicted in the State of New York, Kings County for criminal sale of a prescription for a controlled substance (six counts).

#### CONCLUSION OF LAW

- 1. The aforesaid conduct by Respondent in failing to appear at an investigative inquiry before the State Board of Medical Examiners in response to a lawful request and a properly issued subpoena represents a failure in his duty to cooperate with the Board pursuant to N.J.A.C. 13:45C-1.2, and provides grounds to take disciplinary action against Respondent's license to practice medicine in the state of New Jersey pursuant to N.J.S.A. 45:1-21(e) and N.J.S.A. 45:1-21(h).
- 2. Respondent's failure to submit his biennial renewal in 2005 resulting in a lapsed license status also provides grounds to suspend Respondent's license to practice medicine and surgery in the State of New Jersey pursuant to N.J.S.A. 45:1-7.1 (b).

Based on the foregoing findings and conclusions, a

Provisional Order of Discipline suspending Respondent's license
to practice medicine and surgery in the State of New Jersey was
entered on September 14, 2006 and a copy was forwarded to
respondent through counsel on October 4, 2006 by means of both

regular mail and certified mail. The Provisional Order was subject to finalization by the Board on 5:00 p.m. on the 30<sup>th</sup> business day following entry unless respondent requested a modification or dismissal of the stated Findings of Fact or Conclusions of Law by submitting a written request for modification or dismissal setting forth in writing any and all reasons why said findings and conclusions should be modified or dismissed and submitting any and all documents or other written evidence supporting respondent's request for consideration and reasons therefor.

Although the record reflects that the Provisional Order was served upon respondent, no response has been received to date. Accordingly the Board considered the matter, determined that further proceedings were not necessary and the Provisional Order should be made final. The Provisional Order of Discipline provided for revocation of Respondent's license. The Board of Medical Examiners has determined that the public safety is adequately protected by the provisions of this Order.

ACCORDINGLY, IT IS on this 23rd day of Apr 2007, ORDERED THAT:

1. Respondent's license to practice medicine and surgery in the State of New Jersey is hereby suspended. Respondent may request reinstatement of his license only if he appears before a Committee of the Board of Medical Examiners and otherwise fully complies with the Subpoena that was served upon him on December 12, 2005.

NEW JERSEY STATE BOARD OF MEDICAL EXAMINERS

> Sindy Paul, M.D. Board President

# DIRECTIVES APPLICABLE TO ANY MEDICAL BOARD LICENSEE WHO IS DISCIPLINED OR WHOSE SURRENDER OF LICENSURE HAS BEEN ACCEPTED

## APPROVED BY THE BOARD ON MAY 10, 2000

All licensees who are the subject of a disciplinary order of the Board are required to provide the information required on the Addendum to these Directives. The information provided will be maintained separately and will not be part of the public document filed with the Board. Failure to provide the information required may result in further disciplinary action for failing to cooperate with the Board, as required by N.J.A.C. 13:45C-1 et seq. Paragraphs 1 through 4 below shall apply when a license is suspended or revoked or permanently surrendered, with or without prejudice. Paragraph 5 applies to licensees who are the subject of an order which, while permitting continued practice, contains a probation or monitoring requirement.

### Document Return and Agency Notification

The licensee shall promptly forward to the Board office at Post Office Box 183, 140 East Front Street, 2nd floor, Trenton, New Jersey 08625-0183, the original license, current biennial registration and, if applicable, the original CDS registration. In addition, if the licensee holds a Drug Enforcement Agency (DEA) registration, he or she shall promptly advise the DEA of the licensure action. (With respect to suspensions of a finite term, at the conclusion of the term, the licensee may contact the Board office for the return of the documents previously surrendered to the Board. In addition, at the conclusion of the term, the licensee should contact the DEA to advise of the resumption of practice and to ascertain the impact of that change upon his/her DEA registration.)

#### 2. Practice Cessation

The licensee shall cease and desist from engaging in the practice of medicine in this State. This prohibition not only bars a licensee from rendering professional services, but also from providing an opinion as to professional practice or its application, or representing him/herself as being eligible to practice. (Although the licensee need not affirmatively advise patients or others of the revocation, suspension or surrender, the licensee must truthfully disclose his/her licensure status in response to inquiry.) The disciplined licensee is also prohibited from occupying, sharing or using office space in which another licensee provides health care services. The disciplined licensee may contract for, accept payment from another licensee for or rent at fair market value office premises and/or equipment. In no case may the disciplined licensee authorize, allow or condone the use of his/her provider number by any health care practice or any other licensee or health care provider. (In situations where the licensee has been suspended for less than one year, the licensee may accept payment from another professional who is using his/her office during the period that the licensee is suspended, for the payment of salaries for office staff employed at the time of the Board action.)

A licensee whose license has been revoked, suspended for one (1) year or more or permanently surrendered must remove signs and take affirmative action to stop advertisements by which his/her eligibility to practice is represented. The licensee must professional stationery, or billings. If the licensee's name is utilized in a group practice professional stationery, or billings. If the licensee's name is utilized in a group practice A destruction report form obtained from the Office of Drug Control (973-504-6558) must be filed. If no other licensee is providing services at the location, all medications must be removed and returned to the manufacturer, if possible, destroyed or safeguarded. (In and medications need not be destroyed but must be secured in a locked place for safekeeping.)

## 3. Practice Income Prohibitions/Divestiture of Equity Interest in Professional Service Corporations and Limited Liability Companies

A licensee shall not charge, receive or share in any fee for professional services rendered by him/herself or others while barred from engaging in the professional practice. The licensee may be compensated for the reasonable value of services lawfully rendered and disbursements incurred on a patient's behalf prior to the effective date of the Board action.

A licensee who is a shareholder in a professional service corporation organized to engage in the professional practice, whose license is revoked, surrendered or suspended for a term of one (1) year or more shall be deemed to be disqualified from the practice within the meaning of the Professional Service Corporation Act. (N.J.S.A. 14A:17-11). A disqualified licensee shall divest him/herself of all financial interest in the professional service corporation pursuant to N.J.S.A. 14A:17-13(c). A licensee who is a member of a limited liability company organized pursuant to N.J.S.A. 42:1-44, shall divest him/herself of all financial interest. Such divestiture shall occur within 90 days following the the entry of the Order rendering the licensee disqualified to participate in the applicable form of ownership. Upon divestiture, a licensee shall forward to the Board a copy of documentation forwarded to the Secretary of State, Commercial Reporting Division, demonstrating that the interest has been terminated. If the licensee is the sole shareholder in a professional service corporation, the corporation must be dissolved within 90 days of the licensee's disqualification.

#### 4. Medical Records

If, as a result of the Board's action, a practice is closed or transferred to another location, the licensee shall ensure that during the three (3) month period following the effective date of the disciplinary order, a message will be delivered to patients calling the former office premises, advising where records may be obtained. The message should inform patients of the names and telephone numbers of the licensee (or his/her attorney) assuming custody of the records. The same information shall also be disseminated by means of a notice to be published at least once per month for three (3) months in a newspaper of

general circulation in the geographic vicinity in which the practice was conducted. At the end of the three month period, the licensee shall file with the Board the name and telephone number of the contact person who will have access to medical records of former patients. Any change in that individual or his/her telephone number shall be promptly reported to the Board. When a patient or his/her representative requests a copy of his/her medical record or asks that record be forwarded to another health care provider, the licensee shall promptly provide the record without charge to the patient.

### 5. Probation/Monitoring Conditions

With respect to any licensee who is the subject of any Order imposing a probation or monitoring requirement or a stay of an active suspension, in whole or in part, which is conditioned upon compliance with a probation or monitoring requirement, the licensee shall fully cooperate with the Board and its designated representatives, including the Enforcement Bureau of the Division of Consumer Affairs, in ongoing monitoring of the licensee's status and practice. Such monitoring shall be at the expense of the disciplined practitioner.

- (a) Monitoring of practice conditions may include, but is not limited to, inspection of the professional premises and equipment, and Inspection and copying of patient records (confidentiality of patient identity shall be protected by the Board) to verify compliance with the Board Order and accepted standards of practice.
- (b) Monitoring of status conditions for an impaired practitioner may include, but is not limited to, practitioner cooperation in providing releases permitting unrestricted access to records and other information to the extent permitted by law from any treatment facility, other treating practitioner, support group or other individual/facility involved in the education, treatment, monitoring or oversight of the practitioner, or maintained by a rehabilitation program for impaired practitioners. If bodily substance monitoring has been ordered, the practitioner shall fully cooperate by responding to a demand for breath, blood, urine or other sample in a timely manner and providing the designated sample.

NAME NJ License #

Victor M. Basbus, M.D. MA033789

#### **ADDENDUM**

Any licensee who is the subject of an order of the Board suspending, revoking or otherwise conditioning the license, shall provide the following information at the time that the order is signed, if it is entered by consent, or immediately after service of a fully executed order entered after a hearing. The information required here is necessary for the Board to fulfill its reporting obligations:

Soc	ial Security Number¹:
List the Na affiliated:	ame and Address of any and all Health Care Facilities with which you a
List the Nam you are affilia	ies and Address of any and all Health Maintenance Organizations with whic ated:
Provide the na	ames and addresses of every person with whom you are associated in your ractice: (You may attach a blank sheet of stationery bearing this information)
	ames and addresses of every person with whom you are associated in y ractice: (You may attach a blank sheet of stationery bearing this information

Pursuant to 45 CFR Subtitle A Section 61.7 and 45 CFR Subtitle A Section 60.8, the Board is required to obtain your Social Security Number and/or federal taxpayer identification number in order to discharge its responsibility to report adverse actions to the National Practitioner Data Bank and the HIP Data Bank.

#### NOTICE OF REPORTING PRACTICES OF BOARD REGARDING DISCIPLINARY ACTIONS

Pursuant to N.J.S.A. 52:14B-3(3), all orders of the New Jersey State Board of Medical Examiners are available for public inspection. Should any inquiry be made concerning the status of a licensee, the inquirer will be informed of the existence of the order and a copy will be provided if requested. All evidentiary hearings, proceedings on motions or other applications which are conducted as public hearings and the record, including the transcript and documents marked in evidence, are available for

Pursuant to 45 CFR Subtitle A 60.8, the Board is obligated to report to the National Practitioners Data Bank any action relating to a physician which is based on reasons relating to professional competence

- Which revokes or suspends (or otherwise restricts) a license, (1)(2)
- Which censures, reprimands or places on probation, (3)
- Under which a license is surrendered.

Pursuant to 45 CFR Section 61.7, the Board is obligated to report to the Healthcare Integrity and Protection (HIP) Data Bank, any formal or official actions, such as revocation or suspension of a license(and the length of any such suspension), reprimand, censure or probation or any other loss of license or the right to apply for, or renew, a license of the provider, supplier, or practitioner, whether by operation of law, voluntary surrender, non-renewability, or otherwise, or any other negative action or finding by such Federal or State agency that is publicly available information.

Pursuant to N.J.S.A.45:9-19.13, if the Board refuses to issue, suspends, revokes or otherwise places conditions on a license or permit, it is obligated to notify each licensed health care facility and health maintenance organization with which a licensee is affiliated and every other board licensee in this state with whom he or she is directly associated in private medical practice.

In accordance with an agreement with the Federation of State Medical Boards of the United States, a list of all disciplinary orders are provided to that organization on a monthly basis.

Within the month following entry of an order, a summary of the order will appear on the public agenda for the next monthly Board meeting and is forwarded to those members of the public requesting a copy. In addition, the same summary will appear in the minutes of that Board meeting, which are also made

Within the month following entry of an order, a summary of the order will appear in a Monthly Disciplinary Action Listing which is made available to those members of the public requesting a copy.

On a periodic basis the Board disseminates to its licensees a newsletter which includes a brief description of all of the orders entered by the Board.

From time to time, the Press Office of the Division of Consumer Affairs may issue releases including

Nothing herein is intended in any way to limit the Board, the Division or the Attorney General from